

02-10-05  
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25096 7590 11/19/2004

**PERKINS COIE LLP**

**PATENT-SEA**

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02/11/2005 MBERHE1 00000021 10689972

01 FC:1501 1400.00 OP  
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Melody J. Almberg	(Depositor's name)
<i>Melody J. Almberg</i>	(Signature)
2/8/2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/689,972	10/20/2003	David L. Bath	030048075US1	4433

TITLE OF INVENTION: METHOD AND APPARATUS FOR INSTALLING AND ACTUATING MOVABLE AIRFOILS, INCLUDING CANARDS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	<del>\$1370</del> 1400	\$300	<del>\$1670</del> 1700	02/22/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
BAREFOOT, GALEN L		3644	244-04500A		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Perkins Coie LLP

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Boeing Company

Seattle, Washington

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies \_\_\_\_\_

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- ☒ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-8665 (enclose an extra copy of this form).

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *John M. Wechkin*

Date Feb. 8, 2005

Typed or printed name John M. Wechkin

Registration No. 42,216

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